# OUTDOOR EVENTS PERMIT APPLICATION THE CITY OF ATLANTA OFFICE OF SPECIAL EVENTS (OSE)

## THE CITY OF ATLANTA



SPECIAL EVENTS

SHIRLEY FRANKLIN MAYOR

# THE CITY OF ATLANTA OFFICE OF SPECIAL EVENTS (OSE) APPLICATION AND PERMIT FEES

## **COMMERCIAL (FOR-PROFIT)**

| CLASS | ANTICIPATED<br>ATTENDANCE | APPLICATION FEE | PERMIT FEE   |
|-------|---------------------------|-----------------|--------------|
| Α     | 50,000                    | \$ 150.00       | \$ 15,000.00 |
| В     | 20,000 - 49,000           | \$ 150.00       | \$ 8,000.00  |
| С     | 10,000 – 19,000           | \$ 100.00       | \$ 5,000.00  |
| D     | 2,000 - 9,999             | \$ 100.00       | \$ 2,500.00  |
| E     | 250 – 1,999               | \$ 100.00       | \$ 500.00    |
|       |                           |                 |              |

## **NON-COMMERCIAL (NOT FOR PROFIT)**

| CLASS | ANTICIPATED<br>ATTENDANCE | APPLICATION FEE | PERMIT FEE  |
|-------|---------------------------|-----------------|-------------|
| А     | 50,000                    | \$ 100.00       | \$ 9,000.00 |
| В     | 20,000 - 49,000           | \$ 100.00       | \$ 3,000.00 |
| С     | 10,000 – 19,000           | \$ 50.00        | \$ 1,500.00 |
| D     | 2,000 - 9,999             | \$ 50.00        | \$ 750.00   |
| E     | 250 – 1,999               | \$ 50.00        | \$ 250.00   |
|       |                           |                 |             |

## PERMIT APPLICATION INSTRUCTIONS

Atlanta is host to many public outdoor events on an annual basis. As you start the planning process for your event it is important to recognize that your event plays a unique part in the relationship we have with each individual community and the quality of your event can make a difference to the City of Atlanta.

Our outdoor events add to the character of our neighborhoods and provide an opportunity for neighbors, artists, merchants and family to interact with each other.

This application is intended to help you better understand the outdoor event permitting process and to provide tips that will facilitate your outdoor event planning process.

#### PERMIT PROCESS

In order to process your Outdoor Event Permit Application form, a completed permit application must be received by the City of Atlanta Office of Special Events no later than ninety (90) days prior to the actual date of your event. The Office of Special Events (OSE) shall be responsible for coordinating the permitting of all outdoor events, including each of its components. Generally, the scheduling of all events shall be a first come, first served basis. In addition to obtaining the event permit, there are several other permits that may need to be acquired; you will read more about these types of permits throughout this packet.

It is our goal to assist every event organizer in properly planning safe and successful events that have minimal impact on the surrounding neighborhood.

## SUBMIT YOUR OUTDOOR EVENT PERMIT APPLICATION

After you have carefully developed your outdoor event plan, submit your proposed

event description and plan to the City of Atlanta in the form this application. Please be aware that failure to submit your application in a timely manner or incomplete will result in an immediate denial of your permit application.

Once you have submitted your Special Event Permit Application to the City of Atlanta, you will be contacted to schedule a meeting with the Outdoor Events Committee, composed of all city departments and agencies affected by your event.

We hope that you find these instructions helpful. Thank you for your interest in choosing the City of Atlanta as the location for your event.

#### HAVE A GREAT EVENT!!!!!

#### **EVENT SUMMARY** Date: **DESCRIPTION Event Title: Description:** (This should be promotional in nature) To be placed within the OSE website and calendar. Purpose of **Event:** (Please describe the purpose of proposed event and the program involved) **Event Type:** Festival/Celebration Outdoor/Farmer's Market Circus Parade/Procession/March П П Athletic/Recreation □ Advocacy Museum Special Attraction **Private Party** □ Fund Raiser Concert/Performance Carnival □ Community □ Other: \_\_\_\_ **Anticipated Attendance** Total: \_\_\_\_\_ Per Day: \_\_ CLASS: \_\_\_\_\_ **Anticipated Participants** Total: \_\_\_\_\_ Per Day: \_ DATE/TIME Time: Setup Day of Week: \_\_\_\_\_ **Event Start** Time: \_\_\_\_\_ Date: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Time: \_\_\_\_\_ **Event Ends** Date: \_\_\_\_\_ Day of Week: \_\_\_\_\_ **Dismantle** Date: \_\_ Time: \_\_ Day of Week: \_\_ \*Inclement Weather: Date: \_\_\_\_\_ Time: Day of Week: LOCATION □ PRIVATE PROPERTY □ PUBLIC PROPERTY Location **Description: Location Name:** Address:

City, State & Zip code

Sidewalk

□ Other

Street Closure

□ Park

Specify:

## EVENT SUMMARY - QUESTIONNAIRE

### CONTACTS **Host/Producing** Organization: **Chief Officer of** Host/Producing Organization: **Public Contact:** Name \_\_\_ (Required) ) \_\_\_\_\_ Telephone ( Name \_\_\_\_\_ **Non-Public Contact:** (Required for internal use ) \_\_\_\_ Telephone ( only) \*\*Please supply a number that will be accessible during the proposed event. Name **Media Contact:** (If different from Public Telephone ( Contact) To be placed within the OSE website and calendar. **Vendor Contact:** (If different from Public Telephone ( Contact) To be placed within the OSE website and calendar. Web Address: To be placed within the OSE website and calendar. YES NO П Is this an annual event? How many years have you been holding this event? \_\_\_\_\_ Years Is your event an official part of a current citywide, statewide or nationwide event (i.e. Atlanta Pride Celebration, National Black Arts Festival, etc)? If yes, please list \_\_\_\_\_ Please list any professional event organizer, event service provider, or commercial fund-raiser hired by you that is authorized to work on your behalf to plan, produce and/or manage your event. Applicant Name: Street \_\_\_\_\_\_Suite \_\_\_\_\_ Address: City \_\_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Telephone: Day ( ) \_\_\_\_\_\_ Evening ( ) \_\_\_\_\_ Cellular ( ) \_\_\_\_\_

## EVENT SUMMARY - QUESTIONNAIRE

A written communication from the Host Organization authorizing the applicant and/or professional event organizer to apply for this Outdoor Event Permit on their behalf must be submitted with your permit application.

| Host C  | Organi   | zation:   |               |            |
|---------|----------|---|---------------|------------|
| Chief ( | Officer  | r of Host Organization:   |               |            |
| Applic  | ant Na   | ame:  |               |            |
| Addre   | ss:      | Street  |               | Suite      |
|         |          | City  | State         | _ Zip code |
| Teleph  | one:     | Day ( ) Evening ( ) _   | Cellular (    | )          |
| Please  | e list y | our sponsors for this event:  |               |            |
|         |          |   |               |            |
|         |          |   |               |            |
|         |          |   |               |            |
|         |          |   |               |            |
|         |          | ORGANIZATION STATE  | JS/ REPORTING |            |
| VEO     | NO.      |   |               |            |
| _       | NO       | Is the Host Organization a commercial entity?   |               |            |
|         |          | Is the Host Organization a bona fide tax exempthis application a copy of your IRS 501 (c) tax current tax exempt, nonprofit status. |               |            |
|         |          | Is this event open to the public?   |               |            |
|         |          | Are patrons' admission, entry or participant feel If yes please provide amounts:  |               |            |
|         |          | Are vendor or other fees required?  |               |            |

## FOOD CONCESSIONS OR PREPARATION YES NO Does your event include food concession and/or preparation areas? If yes, please describe how food will be served and/or prepared \_\_\_\_\_ Do you intend to cook food in the event area? If yes, please specify method: ☐ Gas ☐ Electric ☐ Charcoal ☐ Other (specify) \_\_\_\_\_ If you are cooking, please indicate the location (i.g. indoor, outdoor, tent, etc.) Will food items be sold at your event? MERCHANTS AND NON-FOOD VENDORS YES NO Will items or services be sold at your event? If yes, please list or ATTACH a complete list of vendor types \_\_\_\_\_

## SANITATION AND RECYCLING

Please <u>ATTACH</u> an agreement between your organization and the agency performing the clean up of the festival area. This agreement letter <u>must be submitted on the letterhead</u> of the appropriate agency responsible for the cleanup and <u>must</u> include the following:

Contact information: Name and number (accessible during event)

Plan for recycling refuse (describe in detail)

Number of trash receptacles provided by the agency (Please refer to the Environmental Health section

(Please refer to the Environmental Health section of this application to find the minimal number of solid waste receptacles required for your event.)

If you are requesting this service to be provided by the City's Sanitation Department, payment is due five (5) days before the event.

#### PORTABLE REST ROOMS

You are required to provide portable rest room facilities at your event, unless you can substantiate the sufficient availability of both American Disability Act (ADA) accessible and non-accessible facilities in the immediate area of the event site which will be available to the public during your event.

| ES NO  |   |                   |         |          |              |                     |          |          |         |     |        |         |
|--|---|-------------------|---------|----------|--------------|---------------------|----------|----------|---------|-----|--------|---------|
|  | Do you                                  | plan              | to prov | ide port | able re      | st room             | faciliti | es at yo | ur ever | nt? |        |         |
|  | If yes:                                 |                   |         |          |              | oilets<br>able toil |          |          |         |     |        |         |
|  | If no: F                                | Pleas             | e expla | in       |              |                     |          |          |         |     | <br>   |         |
|  |   |                   |         |          |              |                     |          |          |         |     |        |         |
| lease refer<br>ortable toi<br>ortable To           | lets requ                               | ired              | for you | ır event | t <b>.</b>   |                     |          |          |         |     | mal nu | mber of |
| ortable toi  | lets requ                               | ired<br>ider:     | for you | ır event |              |                     |          |          |         |     |        |         |
| ortable toi  | ilets requiliet Provi                   | ired<br>ider:     | for you | ır event | t <b>.</b>   |                     |          |          |         |     | Suite  |         |
| ortable toi  | ilets requirilet Provider Street _ City | ired<br>ider:     | for you | ur event | i.<br>       |                     |          |          | St      | ate | Suite  | e<br>de |
| ortable toil<br>ortable To<br>ddress:<br>elephone: | ilets requirilet Provider Street _ City | ired<br>ider:<br> | for you | ur event | t.<br><br>E\ | vening (            | ) _      |          | St      | ate | Suite  | e<br>de |

Please <u>ATTACH</u> an agreement between your organization and the agency providing the portable toilets. This agreement letter <u>must</u> be <u>submitted</u> on the <u>letterhead</u> of the appropriate agency and <u>must</u> include the number of toilets the organizer is requesting. Please note that for events held in parks, portable toilets must be removed in a timely manner after the event. Failure to remove the toilets by an agreed upon date may result in significant penalties.

## PATRON/MEDIA PARKING

Please indicate on the Site Plan, all parking location for patrons, news media and event staff.

## ENTERTAINMENT AND RELATED ACTIVITIES

| YES   | NO            |  |
|-------|---------------|--|
|       |               | Is there entertainment associated with your event?   |
|       |               | indicate the types of entertainment (check all that apply): ☐ Live Music ☐ Disc Jockey (DJ) ☐ Children Activity Theatrical Performance ☐ Other:  |
|       |               | ete the following information and provide an <u>ATTACHMENT</u> listing all bands/ performers, sound rformance schedule. Please include if the bands are <u>locally</u> or <u>nationally</u> recognized acts. |
|       |               | Number of StagesNumber of Performers/Bands   |
|       |               | Will sound checks be conducted prior to the event?  If yes, State time Finish time   |
|       |               | Will sound amplification be used?  If yes, State time Finish time  |
|       |               | Do you plan to have a patron dance component to either live or recorded music at your event?  If yes, please describe  |
|       |               | Please describe the sound equipment that will be used for your event?  |
|       |               | Does your event include the use of fireworks, rockets, lasers, or other pyrotechnics?  If yes, please describe and ATTACH the appropriate permit.  |
|       |               | Will your event include the use of any signs, banners, decorations, or special lighting?  If yes, please describe  |
|       |               | Are you sponsoring or allowing outside promoters or agencies to officially sponsor events? If yes, please <b>ATTACH</b> a list of each event with dates, times and locations.                                |
|       |               | Marketing and Public Relations   |
| YES   | NO            |  |
|       |               | Will this event be marketed, promoted, or advertised in any manner?  |
|       |               | indicate the types of advertising (check all that apply): □ Local Radio □ National Radio □ Local TV Cable TV □ Local Newspaper □ National Newspaper □ Direct Mail/Flyers □ Internet □ Email □ Billboards     |
| Pleas | e <u>ATTA</u> | <b>CH</b> an explanation of your <u>GENERAL TARGET AREA</u> of your advertisement.   |
|       |               | Do you have a plan to control or limit the placement and/or distribution of promotional signage, sticker and other items?  If yes, please describe:  |
|       |               | Will there by live media coverage during the event?  If yes, please describe:  |

## SITE PLAN/ROUTE MAP

Please <u>ATTACH</u> your event site plan/route map. This should be submitted in <u>blueprint</u>, <u>computer assisted drawing</u> (CAD) format, or hand drawings to scale. To ensure that your hand drawings are to scale, please request a map of the proposed location from the Bureau of Planning at (404) 330-6145 or the Department of Parks, Recreations and Cultural Affairs at (404) 817-6815 (<u>full hand drawing will not be accepted unless otherwise approved by the Office of Special Events</u>) and include but not be limited to:

| •      | (Check once prepared)  |
|--------|--|
|        | An outline of the entire event venue including the names of all streets or areas that are part of the venue and the surrounding area. If the event involves a moving route of any kind, indicate the direction of travel and all streets or lane closure   |
|        | The location of fencing, barriers and/or barricades. Indicate any removable fencing for emergency access.  |
|        | The location of all stages, platforms, scaffolding, bleachers, grandstands, canopies, tents, portable toilets, booths, cooking areas, trash containers, dumpster, drinking water fountains or water stations in park, waste grease containers, gray water containers and other temporary structures. |
|        | The location of first aid facilities and ambulances.   |
|        | Placement of vehicles and/or trailers.   |
|        | Space allotted for parking.  |
|        | Identification of all event components that meet accessibility standards   |
|        | Other related event components not listed above.   |
|        | A detail or close-up of the food booth and cooking area configuration including booth identification of all vendors cooking with flammable gases or barbecue grills.   |
|        | Generators locations and/or source of electricity.   |
|        | Exit location for OUTDOOR events that are fenced and/or locations within tents and tent structures.  |
|        | Will a generator(s) be used?   |
|        | ditional electrical wiring need to be installed?   |
|        | One: Day ( ) Evening ( ) Cellular ( ) (**Please supply a number that will be assessable during the proposed event.)  |
| agreem | <b>ATTACH</b> an agreement between your organization and the agency providing the electrical service. This nent letter <u>must be submitted on the letterhead</u> of the appropriate agency and <u>must</u> include the license of the electrician contracted for service.                           |
|        | TEMPORARY STRUCTURES/BUILDING PERMIT   |
| -      | u using any tents?   |
|        | u building any stages?   |

\*\*If you are building a stage and/or using a tent larger than '10x20' then you <u>must</u> receive approval from the Bureau of Building. However the approval is not needed prior to submitting this application. Please simply include a copy of your <u>original</u> Outdoor Event Building Permit Application submitted to the Bureau of Building.\*\*

## SECURITY PLAN

ATTACHMENTS for this section should include your original Outdoor Event Security Plan form with a description of your security plan to include, but not limited to, crowd control, internal security or venue safety, the number of POST-certified off-duty law enforcement personnel and private security guards which the applicant plans to hire, (where the number of off-duty law enforcement personnel shall be the same or more than the number of private security quards) the arrangements the applicant has made for hiring them and details on the plan for payment.

\*\*Please note that the Commander of Special Operations of the Atlanta Police Department must approve your plan.

## EMERGENCY MEDICAL SERVICES PLAN

ATTACHMENTS for this section should include your original Outdoor Event Emergency Medical Service Plan form describing your medical plan to include, but not limited to, your communications plan, the number, certification levels (MD, RN, Paramedic, EMT) and types of resources that will be at your event and the manner in which they will be managed and deployed. Your plan should include hours of setup and dismantle of medical aid areas. Please refer to the Medical Service Resource Matrix for the minimal required services per class.

\*\*Please note that the Commander of Special Operations of the Atlanta Fire Department must approve your plan.

## **ALCOHOL PERMIT INFORMATION**

| YES                   | NO                     |  |                        |
|-----------------------|------------------------|--|------------------------|
|                       |                        | Does your event involve the use of alcoholic beverages? If yes, please check all that apply:   |                        |
|                       |                        | ☐ Spirituous Liquor ☐ Beer ☐ Wine  |                        |
| List th               | ne exact               | t location and times for alcohol sales:  |                        |
| Loca                  | tion(s):               | Time(s):   | _                      |
| Loca                  | tion(s):               | :Time(s):  | _                      |
| Loca                  | tion(s):               | : Time(s):   | _                      |
|                       | П                      | Have <b>CITY</b> and <b>STATE</b> permits been applied for and/or obtained?  |                        |
|                       | ш                      | riave <u>G</u> and <u>G</u> permite seen applied to analy of estamed.  |                        |
|                       |                        | Do the alcohol vendors presently hold a license for on-premises? If yes information below.   | please provide their   |
|                       |                        | Do the alcohol vendors presently hold a license for on-premises? If yes  | please provide their   |
|                       | _<br>□<br>e of Lice    | Do the alcohol vendors presently hold a license for on-premises? If yes information below.   |                        |
| Name                  | _<br>□<br>e of Lice    | Do the alcohol vendors presently hold a license for on-premises? If yes information below.  The second seco | Suite                  |
| Name<br>Addr          | ess:                   | Do the alcohol vendors presently hold a license for on-premises? If yes information below.  Street   | Suite<br>Zip code      |
| Name<br>Addr          | ess:                   | Do the alcohol vendors presently hold a license for on-premises? If yes information below.  Street  City  State  | Suite<br>Zip code      |
| Name<br>Addr<br>Telep | e of Lice              | Do the alcohol vendors presently hold a license for on-premises? If yes information below.  Street  City  State  | Suite<br>Zip code<br>) |
| Name<br>Addr<br>Telep | e of Lice ess:  phone: | Do the alcohol vendors presently hold a license for on-premises? If yes information below.  Street  City  Day ( ) State  Evening ( ) Cellular (  | Suite<br>Zip code<br>) |

If yes, please ATTACH your application for a Temporary Street, Sidewalk or Park Closing Permit to be submitted to the Special Operations Section of the Atlanta Police Department.

Does your event involve any street closures or any moving components?

## CITY OF ATLANTA - NEIGHBORHOOD PLANNING UNIT

The maps of neighborhoods of the City of Atlanta are grouped into 24 planning units. The NPUs are the principal means for facilitating citizen participation in the City's planning process. The City's neighborhoods can be found on the City of Atlanta website at (<a href="http://www.atlantaga.gov">http://www.atlantaga.gov</a>)

## IMPACT MITIGATION

### NEIGHBORHOOD PLANNING UNIT

For office use only

Please note that the NPU Coordinator, Wendy Scruggs-Murray, will contact you to schedule you to meet with the appropriate NPU impacted by your event. Once met with the NPU please submit your NPU Review Form to the NPU Coordinator.

|  | Signature: Date:   |          |
|--|--|----------|
| Organization   | /Agency Name:  |          |
| Title:   |  | _        |
| Professional   | Event Organizer:   |          |
|  | Signature: Date:   |          |
| Host Organiz   | zation:  | _        |
| Title:   |  | _        |
| Applicant Na   | me:  |          |
| and belief the Special Ever to the rules a agrees to co applicable er a possessory is these rule organization. | the information contained in the foregoing application is true and correct to the best of my knowledge at I have read, understand and agree to abide by the rules and regulations governing the proposed at under the City of Atlanta Code of Ordinance, and I understand that this application is made subject and regulation established by the City Council and/or the Mayor or the Mayor's designee. Applicant amply with all other requirements of the City, County, State, Federal Government and any other netity, which may pertain to the use of the Event venue and the conduct of the Event. In the event they interest subject to property taxation is created by virtue of this use permit, I agree to pay all netrest taxes and the City shall not be liable for the payment of such taxes. I further agree to abide as, and further certify that I, on behalf of the Host Organization, am also authorized to commit that and therefore agree to be financially responsible for any costs and fees that may be incurred by or the Event to the City of Atlanta.  (Please pr | ct<br>at |
|  | What Council District(s) is this event being held in?  |          |
|  | Have you presented your event concept to the City Council member that represent the venue area? If yes, please <b>ATTACH</b> a copy of the letter.   |          |
| CITY COUN<br>YES NO  | NCIL DISTRICT  |          |
|  | ACH a copy of correspondence sent to the NPU Chair about the upcoming event.   |          |
|  | Have you met with the residents, businesses, places of worship, schools and other entities that may be directly impacted by your event?  |          |
|  | Have you presented your event concept to the Neighborhood Planning Unit that represents the venue area? If yes, please <b>ATTACH</b> letters of endorsement or support from each of these groups   | 3.       |
| Which NPU '<br>YES NO  | will be affected by this event? NPU (Please refer to the previous page)  |          |
|  |  |          |

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\_\_\_05\_\_\_--Benchmark dates:

90 DAY /

50 DAY\_

45 DAY

**OFFICE** 

USE

ONLY

## SECURITY PLAN — OUTDOOR EVENTS PERMIT

Office (404) 209-5260 Fax (404) 209-5268 Application Number: \_\_\_\_\_ Date: \_\_\_\_\_ Event Type: \_\_\_\_\_ Zone: \_\_\_\_\_ Bicvcle Race □ Foot Race Street Closing □ Walk / March ☐ Motorcade □ Parade □ Festival Lane Closing □ Rallv Description of Event: \_\_\_\_\_ Time: \_\_\_\_\_ Location (s) / Route: Security Plan Summary: (Attach Plan of Action) Number of officers required: \_\_\_\_\_ (Off-duty ONLY) List agencies represented by Off-duty Officers: \_\_\_\_\_\_ Mobile: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fixed: \_\_\_\_\_ TRAFFIC: SECURITY: Fixed: \_\_\_\_\_ Number of Barricades required: \_\_\_\_\_ (applicant must provide barricades) Name of Security Coordinator (s): \_\_\_\_\_ Telephone: This above portion of this form is to be filled out by the Festival Organizer or Promoter ONLY. Atlanta POLICE OFFICERS ARE PROHIBITED BY CITY ORDINANCE FROM SIGNING THIS FORM AS SECURITY COORDINATORS. \*\*To be completed by the ATLANTA POLICE DEPARTMENT (SOS) ONLY\*\* **APPROVED APPROVED DISAPPROVED DISAPPROVED** 

A specific plan for *crowd control, internal security or venue safety,* to include but not limited to *the number of POST-certified off-duty law enforcement personnel and private security guards* which the applicant plans to hire, (where the number of off-duty law enforcement personnel shall be the same or more than the number of private security guards) the arrangements the applicant has made for hiring them and details on the pan for payment.

Deputy Chief, Field Operations

Atlanta Police Department

Commander, Special Operations Section

Atlanta Police Department

## FIRE SAFETY INSPECTIONS OUTDOOR EVENTS PERMIT

| Office    | (404) 853-7062   |   | Fax (404) 853-7186        |
|-----------|--|---|---------------------------|
| Dates a   | of Festival:<br>and Festival Hours:<br>s of Event:   |   |                           |
| Name      | of Organization/Organizer:   |   |                           |
| 1.        | What is your expected number of persons a  |   |                           |
| 2.        | Do you intend to erect a gate and charge a   | fee for this event? Yes                                       | No 🗆                      |
| 3.        | Will any tents be erected at this event? If yes, how many and what size:                   | Yes 🗆   |                           |
| 4.        | Will any signs or banners be hung?   | Yes □ No □  |                           |
| 5.        | Will there be any street closing for this even   | t? Yes □ No □   |                           |
| 6.        | Will any alcohol be served at this event?  | Yes □ No □  |                           |
| 7.        | Will there be any fireworks/pyrotechnics dispin conjunction with this event?               | played<br>Yes □ No □  |                           |
| 8.        | Will there be any cooking at the event?  If yes, what will be the fuel source:             | Yes □ No □  |                           |
| 9.        | Will there be any LP-Gas, flammable, or cor liquids used at this event? If yes, give the n |   | Il be stored on the site: |
| 10.       | The total number of (off duty) fire inspectors r   | needed for this event:  |                           |
| Please    | ENCLOSE A Copy of the Site Plan Detaili  | ng The Layout of The Festival Area                            | 1.                        |
| You M     | lay Be Required To Have Fire Inspectors/M<br>of The City of J                              | Marshals At This Event By The Orde<br>Atlanta Fire Department | ERS OF THE FIRE MARSHAL   |
| 7         | HIS ABOVE PORTION OF THIS FORM IS TO BE FILL   | ED OUT BY THE FESTIVAL ORGANIZER O                            | R PROMOTER ONLY.          |
| **To be o | completed by the ATLANTA POLICE DEPARTMENT (   | SOS) ONLY**   |                           |
|           | ☐ APPROVED   |   | _                         |
|           | DISAPPROVED  | Print, Fire Marshall, Atlanta Fire                            | Rescue                    |
|           |  | Signature, Fire Marshall Atlanta Fire Rescue                  | _                         |

A specific plan for internal emergency service for the festival, specifying the number of off-duty fire inspectors/marshal in which the applicant has to hire for said event determined by the Fire Marshal (based on the projected crowd size and any hazardous conditions). Also, the arrangement the applicant has made for hiring them, and the details of the plan for payment.

#### ADDENDUM TO ORDINANCE NO. 02-0-1777

#### ATLANTA OUTDOOR FESTIVALS ORDINANCE

#### Appendix 3

*Internal fire safety* plan means a plan submitted by the applicant and approved, as submitted or as modified thereafter, by the Chief of Staff, for the provision of fire safety, to public and private property, performers, entertainers, exhibitors, speakers or other persons in the *festival assembly area*.

#### Appendix 6

A specific plan for *internal fire safety* for the *festival*, specifying the number of off-duty fire inspectors which the applicant plans to hire, what arrangements the applicant has made for hiring them, and the details of the plan for payment. The *internal fire safety* plan shall specify that the number of Atlanta fire marshals/inspectors hired by the applicant shall be the same or more than the number of private fire inspectors/marshals hired for such purpose. At the option of the applicant the fire safety team under the *internal fire safety* plan may be comprised entirely of off-duty Atlanta fire marshal/inspectors.

The *internal fire safety* plan must show that all off-duty fire safety personnel to be used for internal fire safety services must be National Fire Protection Association certified Fire Inspector 1 and have **jurisdictional authority** in the *festival area*.

### Appendix 10

(5) No applicant for, or recipient of. An outdoor festival permit shall be required to provide for, or pay for the cost of, public safety personnel necessary to provide for the protection of a festival and its attendees from the hostile members of the public or counter-demonstrators, or for traffic control outside the festival assembly area, or for general fire enforcement in the vicinity of the festival. The holder of a permit shall be required to provide a plan for internal fire safety, as that term is defined in this article, for the festival assembly area, and shall be required to provide and pay for off-duty fire inspectors/marshals for such internal fire safety purposes, as required by the Chief of Staff. The internal fire safety plan must show that all off-duty fire inspectors/marshals personnel to be used for internal fire safety will be National Fire Protection Association Certified Fire Inspector 1 certified. In determining the adequacy and appropriateness of any internal fire safety plan, the Chief of Staff shall be guided solely by considerations of the number and qualifications of off-duty fire inspectors/marshals necessary to provide internal fire safety to the festival assembly area, as indicated by experience with similar events. To this end, the Chief of Staff may consider the advice and counsel of public safety professionals and persons with expertise in handling or promoting similar events. In evaluating the internal fire safety plan the Chief of Staff may not take into account the message of the festival, nor the content of any speech, nor the identity or associational relationships of the applicant, nor any assumptions or predictions as to the amount of hostility which may be aroused in the public by the content of speech or message conveyed by the festival. The internal fire safety plan shall specify that the number of off-duty Atlanta fire inspectors/marshals hired by the applicant shall be the same or more than the number of private fire inspectors/marshals hired for such purpose. At the option of the applicant the fire safety team under the internal fire safety plan may be comprised entirely of off-duty Atlanta fire inspectors/marshals.

## EMERGENCY MEDICAL SERVICE — OUTDOOR EVENTS PERMIT

| Office (404) 853-4460   | Fax (404) 853-446   | 1                             |
|---|---|-------------------------------|
| Dates and Festival Hours:   |   | <del></del>                   |
| Name of Organization/Organizer:   |   |                               |
| Estimated Attendance: Daily   | Total   |                               |
| Will Alcohol Be Served?   | Yes □ No □  |                               |
| Name and number of the onsite contact du  | ring the festival/event:  |                               |
| Please provide a name, and phone number the Emergency Medical Services for your e | r of the Emergency Medical Service provider or in<br>event.     | dividual (s) providing        |
| Name:   | Phone #   |                               |
| How many of the following will be assigned  | to the festival/event?  |                               |
|   | Registered Nurse<br>Firefighter/Medic                           |                               |
| public water sources.  **Please note that the Chief of Special C                  | Operations of the Atlanta Fire Department mus                   | t approve your plan.          |
| **To be completed by the ATLANTA EMERGENCY  | MEDICAL SERVICE (SOS) ONLY**                                    |                               |
| ☐ APPROVED  | ☐ APPROVED  |                               |
| ☐ DISAPPROVED   | ☐ DISAPPROVED   |                               |
| Please Print Medical Director EMS Proving Event Coverage                          | Signature Medical Director EMS Proving Event Coverage           |                               |
| Please Print- Chief Of Atlanta Fire Rescue EMS/Special Operations                 | Signature – Chief Of Atlanta Fire Rescue EMS/Special Operations |                               |
|   |   | EMS<br>THERE WHEN YOU NEED US |

#### ATLANTA FIRE RESCUE

#### **ADDENDUM TO ORDINANCE NO. 02-0-1777**

#### ATLANTA OUTDOOR FESTIVALS ORDINANCE

#### Change 138-187. Definitions (internal emergency services plan) to read.

Internal emergency services plan means a plan submitted by the applicant and approved, as submitted or as modified thereafter, by the Chief of Staff, for the provision of emergency services, which term shall include fire suppression, fire safety, and emergency medical services, to public and private property, performers, entertainers, exhibitors, speakers or other persons in the *festival assembly area*.

#### Change 138-201. (16) Definitions to read

A specific plan for *internal emergency services* for the festival, specifying the number of firefighter/emergency medical technician which the applicant plans to hire, what arrangements the applicant has made for hiring them. The *internal emergency services plan* shall specify that the number of firefighter/emergency medical technician hired by the applicant shall be the same or more than the number of emergency medical and ambulance personnel hired for such purpose. At the option of the applicant the fire and emergency medical service personnel under the *internal emergency services plan* may be comprised entirely of firefighter/emergency medical technician.

The *internal emergency services plan* must show that all fire personnel to be used for internal emergency services must be National Board of Fire Service Professional Qualifications (NPQ) certified and a State certified emergency medical technician or paramedics, have **jurisdictional authority** in the *festival area*, and that all emergency medical and ambulance service personnel contracted for by the applicant must be employed by companies licensed by the State of Georgia Department of Human Resources.

A specific plan for *internal fire safety* for the festival, specifying the number of off-duty fire inspectors which the applicant plans to hire, what arrangements the applicant has made for hiring them, and the details of the plan for payment. The *internal fire safety plan* shall specify that the number of fire marshals/inspectors hired by the applicant shall be the same or more than the number of private fire inspectors hired for such purpose. At the option of the applicant the fire safety team under *the internal fire safety plan* may be comprised entirely of off-duty fire marshal/inspectors.

The *internal fire safety plan* must show that all off-duty fire safety personnel to be used for internal fire safety services must be National Fire Protection Association certified Fire Inspector I, have **jurisdictional authority** in the *festival area*.

#### Change 138-203. criteria for grant of permit to add

5 (b) No applicant for, or recipient of. An outdoor *festival* permit shall be required to provide for, or pay for the cost of, public safety personnel necessary to provide for the protection of a festival and its attendees from the hostile

members of the public or counter-demonstrators, or for traffic control outside the *festival assembly area*, or for general fire and emergency medical services in the vicinity of the festival. The holder of the permit shall be required to provide a plan for emergency medical services, as that term is defined in this article, for the *festival assembly area*, and shall be

required to provide and pay for firefighter/emergency medical technician, emergency medical personnel and/or ambulance service(s) for such internal emergency medical services. The internal emergency plan must show that all firefighter/emergency medical technicians to be used for internal emergency services will be National Board of Professional Qualifications (NPQ) certified and State certified as emergency medical technicians, and that all emergency medical and ambulance service personnel contracted for by the applicant must be employed by companies licensed by the State of Georgia Department of Human Resources. In determining the adequacy and appropriateness of any internal emergency services plan, the Chief of Staff shall be guided solely by considerations of the number and qualifications of firefighter/emergency medical technicians, emergency medical and ambulance service personnel necessary to provide internal fire and emergency medical services in the festival assembly area, as indicated by experience with similar events. To this end, the Chief of Staff may consider the advice and counsel of public safety and persons with expertise in handling or promoting similar events. In evaluating the internal emergency service plan the Chief of Staff may not take into account the message of the festival, nor the content of any speech, nor the identity or associational relationships of the applicant, nor the assumptions or predictions as to the amount of hostility which may be aroused in the public by the content of speech or message conveyed by the festival. The internal emergency services plan shall specify that the number of firefighter/emergency medical technician hired by the applicant shall be the same or more than the number of emergency medical and ambulance service personnel hired for such purpose. At the option of the applicant the emergency services personnel under the emergency services plan may be comprised entirely of firefighters/emergency medical technician with jurisdictional authority.

5 (c) No applicant for, or recipient of an outdoor festival permit shall be required to provide for, or pay for the cost of, public safety personnel necessary to provide for the protection of a festival and its attendees from the hostile members of the public or counter-demonstrators, or for traffic control outside the festival assembly area, or for general fire enforcement in the vicinity of the festival. The holder of a permit shall be required to provide a plan for internal fire safety, as that term is defined in this article, for the festival assembly area, and shall be required to provide and pay for off-duty fire inspectors/marshals for such internal fire safety purposes, as required by the Chief of Staff. The internal fire safety plan must show that all off-duty fire inspectors/marshals personnel to be used for internal fire safety will be National Fire Protection Association Certified Fire Inspector 1 certified. In determining the adequacy and appropriateness of any internal fire safety plan, the Chief of Staff shall be guided solely by considerations of the number and qualifications of off-duty fire inspectors/marshals necessary to provide internal fire safety to the festival assembly area, as indicated by experience with similar events. To this end, the Chief of Staff may consider the advice and counsel of public safety professionals and persons with expertise in handling or promoting similar events. In evaluating the internal fire safety plan the Chief of Staff may not take into account the message of the festival, nor the content of any speech, nor the identity or associational relationships of the applicant, nor any assumptions or predictions as to the amount of hostility which may be aroused in the public by the content of speech or message conveyed by the festival. The internal fire safety plan shall specify that the number of off-duty fire inspectors/marshals hired by the applicant shall be the same or more than the number of private fire inspectors/marshals hired for such purpose. At the option of the applicant the fire safety team under the internal fire safety plan may be comprised entirely of off-duty fire inspectors/marshals.



### FREQUENTLY ASKED QUESTION

1. What is an Emergency Medical Service Plan?

An Emergency Medical Service Plan is a plan of action, which outlines provisions for the care of the sick and/or injured during permitted events.

2. Who needs an Emergency Medical Service Plan?

Any person(s) or organization desiring to hold an outdoor Event/Festival requiring a permit from the City of Atlanta.

3. Does the City of Atlanta Fire Department recommend any Emergency Medical Service Provider(s)?

City of Atlanta Fire Department does not make recommendations on EMS Providers however the Atlanta Fire Departments EMS/Special Operations Section does provide a list of Emergency Medical Care Providers for anyone wishing to hold a Festival/Event.

**4. Can I use 911 as my Emergency Medical Service Provider to oversee my Event/Festival?** Class A, B, C, D Events - No, Your EMS plan is designed to identify an EMS Provider so as not to

adversely impact the 911 System.

Class E Events – Yes providing that the Chief of EMS/Special Operations makes the determination that your event will not adversely impact the 911 system.

5. Will my Emergency Medical Service Provider have to have the proper credentials (i.e., license, certification) readily available during the Event/Festival?

In accordance with, State of Georgia Department of Human Resources all Medical Providers are required to have identifying credentials while providing Emergency Medical Care.

6. Will I be responsible for EMS Coverage outside of the perimeter of my Event/Festival?

Yes, listed below are the EMS coverage areas of responsibility as per the city ordinance.

- a. Class A Events/Festival greater of three blocks or one thousand five hundred (1500) feet for all
- b. Class B Events/Festival greater of two blocks or one thousand feet (1000)
- c. Class C Events/Festival greater of one block or five hundred (500) feet
- d. Class D Events/Festival a two hundred foot area within this perimeter shall be considered part of the Event/Festival Assembly area.
- 7. What information is required in my EMS Plan?
  - 1) All EMS Plans must have the name of the company providing EMS coverage or the certification of the individuals providing said coverage. (i.e. RN, Paramedic, EMT)
  - 2) All EMS Plans required to have ambulance coverage must have a Medical Directors signature where indicated.
  - 3) All EMS Plans must indicate the type and amount of Emergency Medical coverage planned for that event.
- 8. Where do I send my EMS Plan once completed?

Please mail or fax all EMS Plans to:

ATTN: LT.. T.D. RAGLAND

**City of Atlanta Fire Department** 

EMS/SPECIAL OPERATIONS SECTION 675 PONCE DE LEON AVE. NE SUITE 2001 ATLANTA, GEORGIA 30308

> Office (404) 853-4482 Fax # (404) 853-4461

Thank you for completing your Special Event Permit Application. Before you submit your application to the City of Atlanta, please make sure that the following steps have been completed:

| Have | you? |
|------|------|
|------|------|

|       | Signed and dated your application  |
|-------|--|
| Attac | chments:   |
|       | A copy of your IRS 501(c) tax exempt letter  |
|       | Copy of your Fulton County Permit for Temporary Food Service   |
|       | List of Vendors/Concessionaires/Food and Non-Food Vendors  |
|       | Original agreement letter from the agency performing clean up of the festival area   |
|       | Original agreement letter from the agency providing the portable toilets   |
|       | A complete entertainment list and schedule   |
|       | A complete list of all endorsed events outside of permitted event (after party, receptions, etc.)  |
|       | Explanation of your marketing general target area  |
|       | Event site plan (blue print or computer assisted drawing or approved hand drawings only)   |
|       | Original Building Permit application   |
|       | Original agreement letter from the agency providing the electrical services  |
|       | Original Security Plan application   |
|       | Original Medical Plan application  |
|       | Original Temporary Street, Sidewalk or Park Closing Permit applications  |
|       | <u>Copy - Letter announcing</u> the upcoming proposed Special Event to the <u>City Council member</u> (via email)                                  |
|       | <u>Provided samples of communications</u> that will be distributed to impacted residents, businesses schools, places of worship and other entities |

Have you included your application fee??? (ONLY MONEY ORDERS AND CERTIFIED CASHIERS CHECKS ARE ACCEPTED.) Make checks and money orders payable to the <u>City of Atlanta</u>.

Submit your completed permit application to:

City of Atlanta Office of Special Events 55 Trinity Avenue, SW Suite 2400 Atlanta, Georgia 30303

Mr. W. Imara Canady Mr. Antoine A. Banks Office: (404) 330-6741 Office: (404) 330-6904